

Express Mail Label No.: EV343425969US

Docket No. CE10967JAI016

**DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)
COMBINED WITH POWER OF ATTORNEY**

☒ Declaration Submitted with Initial Filing
☐ Declaration Submitted after initial Filing (surcharge) (37 C.F.R. 1.16(e) required)

Attorney Docket Number: CE10967JAI016

First Named Inventor: Marc Andre BOILLOT et al.

Application Number:

Filing Date:

☒ Regular (Utility) Application ☐ Design application

Group Art Unit:

Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYNCHRONIZATION AND OVERLAP METHOD AND SYSTEM FOR
SINGLE BUFFER SPEECH COMPRESSION AND EXPANSION

☒ is attached hereto

☐ was filed on:

as U.S. Serial No.:

and was amended on:

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
				<input type="checkbox"/> Yes..... <input type="checkbox"/> No
				<input type="checkbox"/> Yes..... <input type="checkbox"/> No

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Docket No. CE10967JA1016

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Provisional Application Serial No.:	
Provisional Application Filing Date:	

I hereby claim the priority benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which is material to the patentability of this application and which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. Application(s):

- ☒ no such application(s) filed
☐ such application(s) identified as follows:

Application No.	Filing Date (day, month, year)	Status (Patented, Pending, Abandoned)

I hereby appoint the attorney(s) or agent(s) associated with Customer Number 34952 to prosecute this application and transact all business in the patent and trademark office connected therewith.

Address all telephone calls to:

Jon A. Gibbons

Telephone: (561) 989-9811

Facsimile: (561) 989-9812

Fleit, Kain, Gibbons, Gutman & Bongini P.L.

One Boca Commerce Center

551 NW 77th Street, Suite 111

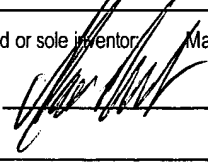
Boca Raton, Florida 33487-1330

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first-named or sole inventor: Marc Andre BOILLLOT		
Inventor's signature		Date: June 20, 2003
Residence Plantation	Florida	
City	State or Foreign Country	
Citizenship	USA	
	Country	
Post Office Address	1450 NW 108th Avenue, # 249	
	Street Address	
Plantation	Florida	33322
City	State or Country	Zip Code

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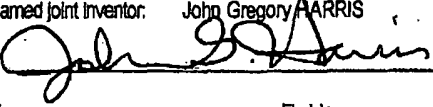
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Full name of first-named or sole inventor: Marc Andre BOILLOT		
Inventor's signature _____		Date: _____
Residence Plantation _____	Florida	
City _____	State or Foreign Country	
Citizenship _____	USA	
	Country	
Post Office Address _____	1450 N.W. 108th Avenue, # 249	
	Street Address	
Plantation _____	Florida	33322
City _____	State or Country	Zip Code

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Docket No. CE10967JAI016

Full name of second-named joint inventor:	John Gregory HARRIS	
Inventor's signature		Date: 6/26/03
Residence	Gainesville	Florida
	City	State or Foreign Country
Citizenship	USA	
	Country	
Post Office Address	2825 N.W. 27th Terrace	
	Street Address	
Gainesville	Florida	32605
City	State or Country	Zip Code

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Docket No. CE10967JAI016

Full Name of third-named joint inventor:		Thomas Lawrence REINKE	
Inventor's signature		Date:	
Residence	Fairborn	Ohio	
	City	State or Foreign Country	
Citizenship	USA		
	Country		
Post Office Address	1199 Steinbeck Way, Apt. E		
	Street Address		
Fairborn	Ohio	45324	
City	State or Country	Zip Code	

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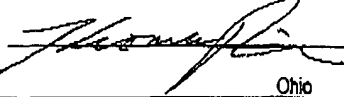
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Inventor's signature _____		Date: _____
Residence Gainesville	Florida	
City	State or Foreign Country	
Citizenship	USA	
	Country	
Post Office Address	2825 N.W. 27th Terrace	
	Street Address	
Gainesville	Florida	32605
City	State or Country	Zip Code

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Full Name of third-named joint inventor:	Thomas Lawrence REINKE	
Inventor's signature		Date: 6/24/03
Residence	Fairborn	Ohio
	City	State or Foreign Country
Citizenship	USA	
	Country	
Post Office Address	1199 Steinbeck Way, Apt. E	
	Street Address	
Fairborn	Ohio	45324
City	State or Country	Zip Code